

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
MINUTEMAN PAC INC

Full Name (Last, First, Middle Initial)

A. BILL GREENE FOR CONGRESS

Mailing Address 1819-C NORTH ELM STREET

City COMMERCE State GA Zip Code 30529

Purpose of Disbursement
Political ContributionCandidate Name
WILLIAM LAWRENCE GREENE011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2007
☐ Primary ☐ General
☒ Other (specify) ▼
Special-General

State: GA District: 10

Transaction ID: SB23.72056

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | / | 3 | 1 | / | 2 | 0 | 0 | 7 |

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. BILL GREENE FOR CONGRESS

Mailing Address 1819-C NORTH ELM STREET

City COMMERCE State GA Zip Code 30529

Purpose of Disbursement
Political ContributionCandidate Name
WILLIAM LAWRENCE GREENE011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2007
☐ Primary ☐ General
☒ Other (specify) ▼
Runoff

State: GA District: 10

Transaction ID: SB23.72059

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | / | 3 | 1 | / | 2 | 0 | 0 | 7 |

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

10000.00